

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American College of Radiology Association Political Action Committee

ADDRESS (number and street)

1891 Preston White Drive

☐ Check if different than previously reported. (ACC)

Reston

VA

20191

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00343459

3. IS THIS
REPORTNEW
(N)

OR

AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☒ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer DR William Herrington

Signature of Treasurer

DR William Herrington

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American College of Radiology Association Political Action Committee

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
09 / 01 / 2011 To: M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2011		694551.36
(b) Cash on Hand at Beginning of Reporting Period.....	973115.71	
(c) Total Receipts (from Line 19)	91059.90	1016086.47
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1064175.61	1710637.83
7. Total Disbursements (from Line 31)	206614.27	853076.49
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	857561.34	857561.34
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American College of Radiology Association Political Action Committee

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y
09 01 2011

To:

M M / D D / Y Y Y Y Y
09 30 2011
I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

84397.05

910595.64

(ii) Unitemized

6660.00

105434.66

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

91057.05

1016030.30

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ▶

91057.05

1016030.30

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

2.85

56.17

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c))..... ▶

91059.90

1016086.47

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ▶

91059.90

1016086.47

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	180000.00	808000.00
24. Independent Expenditures (use Schedule E)	25759.08	25759.08
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	2520.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2520.00
29. Other Disbursements	855.19	16797.41
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	206614.27	853076.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	206614.27	853076.49

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	91057.05	1016030.30
34. Total Contribution Refunds (from Line 28(d))	0.00	2520.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	91057.05	1013510.30
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	0.00	0.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 163

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. William Glucksman

Mailing Address 50 Colony Rd

City

West Hartford

State

CT

Zip Code

06117-2214

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jefferson Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2011

Transaction ID : 41852339

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Thomas Warfel

Mailing Address 2213 NE 160th Ave

City

Vancouver

State

WA

Zip Code

98684-4501

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Specialists of the Northwest

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	05	/	2011

Transaction ID : 41852342

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Anita Hawkins

Mailing Address 218 N Charles St Apt 1807

City

Baltimore

State

MD

Zip Code

21201-4092

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of MD Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2011

Transaction ID : 41859505

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 7 OF 163
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Adam Krompecher

Mailing Address 313 Mount View Drive

City	State	Zip Code
Charleston	WV	25314-1040

FEC ID number of contributing
federal political committee.

C

Name of Employer
Kanawha Valley RadiologyOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2011

Transaction ID : 41859966

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. E Michael Harned

Mailing Address 256 North New Jersey Street

City	State	Zip Code
Indianapolis	IN	46204-2111

FEC ID number of contributing
federal political committee.

C

Name of Employer
Lafayette RadiologyOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2011

Transaction ID : 41862280

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Jeffrey Freeman

Mailing Address 14924 Montclair Dr

City	State	Zip Code
Westfield	IN	46074-8123

FEC ID number of contributing
federal political committee.

C

Name of Employer
Summit RadiologyOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2011

Transaction ID : 41982080

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1500.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 163

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Aashish Patel

Mailing Address 3132 N Norfolk St

City

Indianapolis

State

IN

Zip Code

46224-2515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Indiana Univ School of Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

411.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 08 / 2011

Transaction ID : 41983106

Amount of Each Receipt this Period

411.00

Full Name (Last, First, Middle Initial)

B. Dr. Stephanie Holz

Mailing Address 6967 N Laredo Dr

City

Mc Cordsville

State

IN

Zip Code

46055-6045

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summit Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 11 / 2011

Transaction ID : 41997775

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Gregory Balmforth

Mailing Address 1710 E Sunburst Ln

City

Spokane

State

WA

Zip Code

99224-8331

FEC ID number of contributing
federal political committee.

C

Name of Employer

Inland Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 12 / 2011

Transaction ID : 41998515

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

711.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Gregory Sterne

Mailing Address 1046 NE 88th Street

City
Seattle

State
WA

Zip Code
98115-3021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Inland Imaging Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

09 / 14 / 2011

Transaction ID : 42010657

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Dr. John Legan

Mailing Address 1135 Hurricane Hill Rd.

City

Dyersburg

State

TN

Zip Code

38024-6819

FEC ID number of contributing
federal political committee.

C

Name of Employer

Independent Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011712

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. Dr. Mark Jones

Mailing Address 35 Beech Cir

City

Dyersburg

State

TN

Zip Code

38024-6561

FEC ID number of contributing
federal political committee.

C

Name of Employer

Independent Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011713

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

550.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 163

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Thomas Thompson

Mailing Address P.O. Box 1296

City

Dyersburg

State

TN

Zip Code

38025-1296

FEC ID number of contributing
federal political committee.

C

Name of Employer

Independent Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2011

Transaction ID : 42011715

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

B. Dr. Martha I Lima

Mailing Address 3221 Bridgefield Drive

City

Lakeland

State

FL

Zip Code

33803-7903

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Imaging Specialists of L

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

416.67

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2011

Transaction ID : 42011716

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

C. Dr. Lawrence Whitney

Mailing Address 19114 Saint Emillon Ct

City

Lutz

State

FL

Zip Code

33558-5361

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

416.66

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	14	/	2011

Transaction ID : 42011725

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)..... ►

1033.33

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 163

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Bret Henricks

Mailing Address 826 Hanover Way

City

Lakeland

State

FL

Zip Code

33813-2675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology & Imaging Specialists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2011

Transaction ID : 42011726

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

B. Dr. Scott Fargher

Mailing Address 10602 Midview Ter

City

Thonotosassa

State

FL

Zip Code

33592-3955

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Imaging Specialists of L

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2011

Transaction ID : 42011727

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

C. Dr. Michael Esposito

Mailing Address Radiology & Imaging Specialist
PO Box 90609

City

Lakeland

State

FL

Zip Code

33804-0609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology & Imaging Specialist

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.67

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 14 / 2011

Transaction ID : 42011728

Amount of Each Receipt this Period

416.67

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.01

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Angela Sroufe

Mailing Address 18002 Richmond Place Dr Apt 517

City

Tampa

State

FL

Zip Code

33647-1726

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

416.66

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011729

Amount of Each Receipt this Period

416.66

Full Name (Last, First, Middle Initial)

B. Dr. Fakhir Elmasri

Mailing Address 802 Hanover Way

City

Lakeland

State

FL

Zip Code

33813-2675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Imaging Specialists of L

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

416.67

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011730

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

C. Dr. Christian Schmitt

Mailing Address 2822 Timber Knoll Dr

City

Valrico

State

FL

Zip Code

33596-5664

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Imaging Specialists of L

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

416.66

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011731

Amount of Each Receipt this Period

416.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1249.99

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Charley Myrick III

Mailing Address 1104 Kells Ct

City

Lakeland

State

FL

Zip Code

33813-1243

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Imaging Specialists of L

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.66

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011732

Amount of Each Receipt this Period

416.66

Full Name (Last, First, Middle Initial)

B. Dr. Husam Habboub

Mailing Address 10204 Arbor Side Dr

City

Tampa

State

FL

Zip Code

33647-2951

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Imaging Specialists of L

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.67

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011733

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

c. Dr. Robert Harriage II

Mailing Address RIS of Lakeland PA
2120 Lakeland Hills Blvd

City

Lakeland

State

FL

Zip Code

33805-2906

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Imaging Specialists of L

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.67

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011734

Amount of Each Receipt this Period

416.67

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1250.00

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Larry Dietrich

Mailing Address Specialists of Lakeland
PO Box 90609

City State Zip Code
Lakeland FL 33804-0609

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology and Imaging Specialists of L

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.67

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011745

Amount of Each Receipt this Period

416.67

Full Name (Last, First, Middle Initial)

B. Dr. Charles McGuire

Mailing Address 1937 N Saddle Creek Ct

City State Zip Code
Wichita KS 67206-4401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wichita Radiological Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011747

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dr. Brian Kott

Mailing Address 7703 81st Ave NW

City State Zip Code
Gig Harbor WA 98335-6262

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Washington

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

09 / 14 / 2011

Transaction ID : 42011900

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1816.67

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Salil Parikh

Mailing Address 9477 Johnson Rd Ext

City

Germantown

State

TN

Zip Code

38139-3603

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Assoc of Ocala

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037832

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Eric Neils

Mailing Address 904 Squire Oaks Dr

City

Villa Hills

State

KY

Zip Code

41017-1371

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of N KY

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037833

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dr. Richard McWhorter

Mailing Address 5221 U.S. Route 60 East

City

Huntington

State

WV

Zip Code

25705

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037834

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

900.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Clarence Davis III

Mailing Address 627 Springlake Rd

City State Zip Code
 Columbia SC 29206-2150

FEC ID number of contributing federal political committee.

C

Name of Employer
 Lexington Radiology Associates

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 16 / 2011

Transaction ID : 42037837

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Steven Miller

Mailing Address 23 Moffat Rd

City State Zip Code
 Waban MA 02468-1112

FEC ID number of contributing federal political committee.

C

Name of Employer
 Newton Wellesley Hosp

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 16 / 2011

Transaction ID : 42037838

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Thomas Poulton

Mailing Address Aultman Hospital
 2600 6th St SW

City State Zip Code
 Canton OH 44710-1702

FEC ID number of contributing federal political committee.

C

Name of Employer
 Aultman Hospital

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 16 / 2011

Transaction ID : 42037839

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Cecil Cupp III

Mailing Address Hot Springs Radiology Services
3633 Central Ave Ste D

City Hot Springs State AR Zip Code 71913-6475

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hot Springs Radiology Services, Ltd.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037841

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Gary Geil

Mailing Address West Coast Radiology
1100 N Tustin Ave

City Santa Ana State CA Zip Code 92705-3595

FEC ID number of contributing
federal political committee.

C

Name of Employer
Santa Ana Tustin Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037842

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

C. Dr. Timothy Farrell

Mailing Address 128 Killarney

City Williamsburg State VA Zip Code 23188-8415

FEC ID number of contributing
federal political committee.

C

Name of Employer
Peninsula Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037843

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

590.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Bibb Allen JR

Mailing Address 3245 E Briarcliff Rd

City

Birmingham

State

AL

Zip Code

35223-1304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montclair Baptist Medical Center

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037844

Amount of Each Receipt this Period

625.00

Full Name (Last, First, Middle Initial)

B. Dr. Bradford Richmond

Mailing Address Cleveland Clinic Foundation
9500 Euclid Ave

City

Cleveland

State

OH

Zip Code

44195-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Cleveland Clinic Foundation

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037854

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Dr. Andrew Beloni

Mailing Address 5624 Laurium Rd

City

Charlotte

State

NC

Zip Code

28226-5610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Charlotte Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037855

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

715.00

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Mark Alson

Mailing Address 6641 N Forkner Ave

City State Zip Code
 Fresno CA 93711-1326

FEC ID number of contributing federal political committee.

C

Name of Employer
 Sierra Imaging Associates

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 16 2011

Transaction ID : 42037856

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Dr. Christopher Conlin

Mailing Address 6590 Andersonville Rd

City State Zip Code
 Clarkston MI 48346-2794

FEC ID number of contributing federal political committee.

C

Name of Employer
 DRA of Flint, PC

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 16 2011

Transaction ID : 42037857

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Dr. David Buck

Mailing Address 272 Harrison Rd

City State Zip Code
 Turtle Creek PA 15145-1042

FEC ID number of contributing federal political committee.

C

Name of Employer
 Radiologic Consultants, Ltd.

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 16 2011

Transaction ID : 42037858

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

192.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Rayda Hernandez-Guasch

Mailing Address Mail Boxes Etc

89 Ave De Diego Ste 105

City

San Juan

State

PR

Zip Code

00927-6346

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of Puerto Rico

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037859

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dr. Terry Martin

Mailing Address Rad Assoc of Birmingham PC

2090 Columbiana Rd.

City

Vestavia

State

AL

Zip Code

35216-2153

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rad Assoc of Birmingham PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037860

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Dr. Amy Sobel

Mailing Address 11104 Creek Point Dr

City

Matthews

State

NC

Zip Code

28105-7702

FEC ID number of contributing
federal political committee.

C

Name of Employer

Charlotte Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037862

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

230.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Kent Lancaster

Mailing Address 3141 Sundance Path

City

Stevensville

State

MI

Zip Code

49127-9376

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Berrie

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037865

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

B. Dr. Paul Ellenbogen

Mailing Address 6612 Cliffbrook Dr

City

Dallas

State

TX

Zip Code

75254-8613

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southwest Imaging & Interven specialis

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

2395.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037867

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

C. Dr. James Courtney

Mailing Address 27 Hillwood Rd

City

Mobile

State

AL

Zip Code

36608-2311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Mobile

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037868

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

292.34

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Rita Freimanis

Mailing Address Wake Forest Univ Sch of Medicine
 Medical Center Blvd

City Winston Salem State NC Zip Code 27157-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
Wake Forest Univ Sch of Medicine

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037869

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Dr. Daniel Cohen

Mailing Address 1480 Brookfield Rd

City Yardley State PA Zip Code 19067-3930

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Affiliates of Central New Je

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

610.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037870

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Dr. Raymond A. Armstrong

Mailing Address Radiology of Huntsville
 2006 Franklin St SE Ste 200

City Huntsville State AL Zip Code 35801-4537

FEC ID number of contributing
federal political committee.

C

Name of Employer
Baptist Medical Ctr-Montclair

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037874

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

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165.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Paul Lampert

Mailing Address 11595 E 26th St

City
YumaState
AZZip Code
85367-2203FEC ID number of contributing
federal political committee.

C

Name of Employer

MDIG

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037875

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Dr. H E. Longmaid III

Mailing Address 52 Harwich Rd

City

Chestnut Hill

State

MA

Zip Code

02467-3023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Deaconess Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.03

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037876

Amount of Each Receipt this Period

41.67

Full Name (Last, First, Middle Initial)

C. Dr. James Hiken

Mailing Address 7109 Cove Pointe Pl

City

Prospect

State

KY

Zip Code

40059-9680

FEC ID number of contributing
federal political committee.

C

Name of Employer

Diag. Imaging Alliance of Louisville

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2011

Transaction ID : 42037878

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

208.67

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Kevin Smith

Mailing Address Regional Diagnostic Radiology
1406 6th Ave N

City State Zip Code
Saint Cloud MN 56303-1900

FEC ID number of contributing
federal political committee.

C

Name of Employer

Regional Diagnostic Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

09 / 16 / 2011

Transaction ID : 42037880

Amount of Each Receipt this Period

208.34

Full Name (Last, First, Middle Initial)

B. Dr. Dina Arceo

Mailing Address 4908 Bluff Run Dr

City State Zip Code
Greensboro NC 27455-2200

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049543

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. Paul Barry

Mailing Address Greensboro Radiology PA
1317 N Elm St Ste 1B

City State Zip Code
Greensboro NC 27401-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology Assoc PA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049544

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

554.48

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 OF 163

(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Melinda Blietz

Mailing Address 11 Stonecreek Ct

City Greensboro State NC Zip Code 27455-2242

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.99

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049545

Amount of Each Receipt this Period

83.43

Full Name (Last, First, Middle Initial)

B. Dr. Mark Boles

Mailing Address 380 Throckmorton Rd

City Madison State NC Zip Code 27025-7939

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049546

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. Elizabeth Brown

Mailing Address 6204 Moores Creek Dr

City Summerfield State NC Zip Code 27358-8007

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049547

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

429.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 OF 163

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. David Call

Mailing Address 329 Walter Chambers St.

City State Zip Code
Eden NC 27288-3421

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 19 2011

Transaction ID : 42049549

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

B. Dr. David Clark JR

Mailing Address Greensboro Radiology
1317 N Elm St Ste 1B

City State Zip Code
Greensboro NC 27401-1023

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 19 2011

Transaction ID : 42049550

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. John Curnes

Mailing Address Greensboro Radiology PA
1317 N Elm St Ste 1B

City State Zip Code
Greensboro NC 27401-1023

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 19 2011

Transaction ID : 42049551

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

519.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 27 OF 163
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Thomas D'Alessio

Mailing Address 483 N Avalon Rd

City

Winston Salem

State

NC

Zip Code

27104-2044

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2011

Transaction ID : 42049552

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

B. Dr. John Edmunds

Mailing Address 3015 Lake Forest Dr

City

Greensboro

State

NC

Zip Code

27408-3824

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2011

Transaction ID : 42049553

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. Gary FischerMailing Address 1317 N. Elm St.
Suite 1B

City

Greensboro

State

NC

Zip Code

27401-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology Assoc PA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2011

Transaction ID : 42049555

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

519.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Peter Gallerani

Mailing Address Greensboro Radiology PA
1317 N Elm St Ste 1B

City Greensboro State NC Zip Code 27401-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049556

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

B. Dr. Dayne Hassell III

Mailing Address 2206 Madison Ave

City Greensboro State NC Zip Code 27403-1514

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049557

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. Adam Henn

Mailing Address 2007 Needleleaf Ln

City Greensboro State NC Zip Code 27410-2882

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049558

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

519.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 29 OF 163

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Rebecca Kennedy

Mailing Address 5328 Three Waters Rd

City

Graham

State

NC

Zip Code

27253-9679

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.99

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049559

Amount of Each Receipt this Period

83.43

Full Name (Last, First, Middle Initial)

B. Dr. Thomas Lawrence

Mailing Address 21 Flagship Cv

City

Greensboro

State

NC

Zip Code

27455-3428

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology PA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049562

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. Walter LiebkemannMailing Address Greensboro Radiology PA
1317 N Elm St Ste 1B

City

Greensboro

State

NC

Zip Code

27401-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049563

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

429.57

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER: PAGE 30 OF 163
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Eric Mansell

Mailing Address 208 Staunton Dr

City	State	Zip Code
Greensboro	NC	27410-6065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro RadiologyOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049564

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

B. Dr. Christopher Mattern

Mailing Address 5807 Scotland Oaks Ct

City	State	Zip Code
Greensboro	NC	27407-7274

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro RadiologyOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049565

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. James Maxwell

Mailing Address 4 Loch Ridge Dr

City	State	Zip Code
Greensboro	NC	27408-3868

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro RadiologyOccupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049566

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

519.21

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Steven Olson

Mailing Address 3 Captains Pt

City

Greensboro

State

NC

Zip Code

27455-3430

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049569

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

B. Dr. Liviu Pop

Mailing Address 1651 Southwood Dr

City

Asheboro

State

NC

Zip Code

27205-1444

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049570

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. Robert Shepherd

Mailing Address 603 Chancery Pl

City

Greensboro

State

NC

Zip Code

27408-7509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greensboro Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049571

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

519.21

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Mark Shogry

Mailing Address Greensboro Radiology PA
1317 N Elm St Ste 1B

City Greensboro State NC Zip Code 27401-1023

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049572

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

B. Dr. John Stahl

Mailing Address 3 Baywater Ln

City Greensboro State NC Zip Code 27408-3123

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology, PA

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049573

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. Taylor Stroud

Mailing Address 300 Wentworth Dr

City Greensboro State NC Zip Code 27408-6522

FEC ID number of contributing federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049574

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

519.21

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Kyle Talbot

Mailing Address Greensboro Radiology PA
1317 N Elm St Ste 1B

City Greensboro State NC Zip Code 27401-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049575

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

B. Dr. Susan Turner

Mailing Address 3602 Primrose Ave

City Greensboro State NC Zip Code 27408-3198

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049576

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

C. Dr. William Veazey

Mailing Address Greensboro Radiology PA
1317 N Elm St Ste 1B

City Greensboro State NC Zip Code 27401-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro Radiology Assoc PA

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049577

Amount of Each Receipt this Period

173.07

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

519.21

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Glenn Yamagata

Mailing Address Greensboro Radiology PA
1317 N Elm St Ste 1B

City Greensboro State NC Zip Code 27401-1023

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greensboro Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

697.31

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049578

Amount of Each Receipt this Period

173.07

Full Name (Last, First, Middle Initial)

B. Dr. Robert Barr

Mailing Address Mecklenburg Radiology Assoc
PO Box 221249

City Charlotte State NC Zip Code 28222-1249

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mecklenburg Radiology Associates, P.A.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

958.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049588

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Dr. Rita S. Patel

Mailing Address 3 Ware Rd

City Upper Saddle River State NJ Zip Code 07458-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049652

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

224.07

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Mitchell Miller

Mailing Address 2 Constitution Ct Apt 1009

City

Hoboken

State

NJ

Zip Code

07030-6730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

790.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049653

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Sean D. Pierce

Mailing Address 509 48th Ave Apt 2A

City

Long Island City

State

NY

Zip Code

11101-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049655

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Dr. George Joseph Ferrone

Mailing Address 440 E 62nd St Apt 18F

City

New York

State

NY

Zip Code

10065-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049656

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 OF 163
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Hiten Magan Malde

Mailing Address 7 Kinkaid Ave

City State Zip Code
Closter NJ 07624-2908

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049657

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Adam Bogomol

Mailing Address 200 W 72nd St Apt 11K

City State Zip Code
New York NY 10023-3267

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049658

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Dr. Harry Agress JR

Mailing Address Hackensack University Medical Ctr
30 Prospect Ave

City State Zip Code
Hackensack NJ 07601-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049659

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 OF 163

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Arthur S. Albert

Mailing Address 124 W 60th St Apt 45

City

New York

State

NY

Zip Code

10023-7451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049660

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Kavita Patel

Mailing Address 35 Annfield Ct

City

Staten Island

State

NY

Zip Code

10304-1301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049661

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Dr. Andrew Osiason

Mailing Address 506 Julie Ct

City

Wyckoff

State

NJ

Zip Code

07481-1101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049662

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 38 OF 163

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. David Panush

Mailing Address 538 E 84th St Apt 4E

City
New YorkState
NYZip Code
10028-7357FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049663

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Joel Rakow

Mailing Address 505 Ivy Lane

City
WyckoffState
NJZip Code
07481-1072FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049664

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Dr. Patrick Toth

Mailing Address 201 E 80th St Apt 8F

City
New YorkState
NYZip Code
10075-0515FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049665

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 39 OF 163

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. John DeMeritt

Mailing Address 18 Baldwin Rd

City

Saddle River

State

NJ

Zip Code

07458-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049666

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Regina Chu

Mailing Address 15 Ogle Rd

City

Old Tappan

State

NJ

Zip Code

07675-7028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049667

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Dr. Sunitha Sunkavalli

Mailing Address 943 High Mountain Rd

City

Franklin Lakes

State

NJ

Zip Code

07417-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2011

Transaction ID : 42049668

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

68.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Margaret Emy

Mailing Address 245 Oxford Dr

City

Tenafly

State

NJ

Zip Code

07670-3117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049669

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Dr. Joel Budin

Mailing Address 140 Chestnut St

City

Englewood

State

NJ

Zip Code

07631-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049670

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Dr. Clement Yang

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049671

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. William Kim

Mailing Address 405 Golf Course Dr

City
LeoniaState
NJZip Code
07605-1415FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049672

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Dr. Gene Han

Mailing Address 24 Briarcliff Rd

City
TenaflyState
NJZip Code
07670-2902FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049673

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Dr. Robert Krugman

Mailing Address 334 W 86th St Apt 4C

City
New YorkState
NYZip Code
10024-3157FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049674

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

57.69

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Gail Starr

Mailing Address 754 Drayton Pl

City

Rivervale

State

NJ

Zip Code

07675-6116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.14

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049675

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Dr. Gregory Nicola

Mailing Address 80 Riverside Blvd
Apt 14P

City

New York

State

NY

Zip Code

10069-0314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049676

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Dr. Kenneth Berkenstock

Mailing Address P.O. Box 3555

City

Lancaster

State

PA

Zip Code

17604-3555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049677

Amount of Each Receipt this Period

84.00

SUBTOTAL of Receipts This Page (optional)..... ►

122.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 43 OF 163

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Thomas Brooks

Mailing Address 1930 Pickering Trl

City

Lancaster

State

PA

Zip Code

17601-4972

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
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Transaction ID : 42049678

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. Dr. Cindy JaneskyMailing Address Lancaster Radiology Associates
PO Box 3555

City

Lancaster

State

PA

Zip Code

17604-3555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
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Transaction ID : 42049689

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Dr. Jeffrey Kramer

Mailing Address 2147 Meadow Ridge Dr

City

Lancaster

State

PA

Zip Code

17601-5762

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

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Transaction ID : 42049693

Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional)..... ►

185.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Paul Leslie

Mailing Address 260 Eshelman Rd

City

Lancaster

State

PA

Zip Code

17601-5645

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049694

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dr. Leigh Shuman

Mailing Address Lancaster Radiology Associates
PO Box 3555

City

Lancaster

State

PA

Zip Code

17604-3555

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049696

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Dr. Patrick Weybright

Mailing Address 1234 Mastersonville Rd

City

Manheim

State

PA

Zip Code

17545-9461

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049699

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Simon Westacott

Mailing Address 1965 Glendower Dr

City

Lancaster

State

PA

Zip Code

17601-4945

FEC ID number of contributing
federal political committee.

C

Name of Employer

Lancaster Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049700

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dr. Marchello Barbarisi

Mailing Address 415 City Ave Apt 13

City

Merion Station

State

PA

Zip Code

19066-1837

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049702

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Dr. Steven Ebner

Mailing Address 12 Camp David Rd

City

Wilmington

State

DE

Zip Code

19810-4536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

09 / 19 / 2011

Transaction ID : 42049703

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

180.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Robert Pinsk

Mailing Address 146 Colket Ln

City

Devon

State

PA

Zip Code

19333-1205

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049709

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Dr. Nancy SherwinMailing Address The Lankenau Hospital
100 E Lancaster Ave

City

Wynnewood

State

PA

Zip Code

19096-3413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049710

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. Dr. Eric SteinMailing Address Bryn Mawr Hospital
130 S Bryn Mawr Ave

City

Bryn Mawr

State

PA

Zip Code

19010-3121

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049712

Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional)..... ►

188.34

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Harry Zegel

Mailing Address 156 Valley Rd

City

Ardmore

State

PA

Zip Code

19003-1511

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of the Main Line

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049714

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. Dr. William Enochs

Mailing Address 230 Poplar Ave

City

Wayne

State

PA

Zip Code

19087-3504

FEC ID number of contributing
federal political committee.

C

Name of Employer

Thomas Jefferson University Ho

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 19 / 2011

Transaction ID : 42049721

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Dr. Ericha Benshoff

Mailing Address 5827 Rivoli Drive

City

Macon

State

GA

Zip Code

31210-1449

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2011

Transaction ID : 42059902

Amount of Each Receipt this Period

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SUBTOTAL of Receipts This Page (optional)..... ►

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TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Miguel Fernandez

Mailing Address MUSC Children's Hosp
171 Ashley Ave

City Charleston State SC Zip Code 29425-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer
MUSC Children's Hosp

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2011

Transaction ID : 42059903

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Mark Grossnickle

Mailing Address 167 Lake View Dr N

City Macon State GA Zip Code 31210-8642

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Macon, P.C.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2011

Transaction ID : 42059904

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Lee Hall

Mailing Address 3160 Vista Circle

City Macon State GA Zip Code 31204-1960

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Macon

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2011

Transaction ID : 42059905

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X)
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Charles Kellum

Mailing Address 1051 Country Squire Dr

City

Macon

State

GA

Zip Code

31210-1272

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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09	/	20	/	2011

Transaction ID : 42059906

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Kenworth Morgan

Mailing Address 2571 Crest Hwy

City

Thomaston

State

GA

Zip Code

30286-7100

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2011

Transaction ID : 42059907

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Dr. Reginald D. Osbon

Mailing Address 149 Weatherby Dr

City

Macon

State

GA

Zip Code

31210-8233

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2011

Transaction ID : 42059908

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Larry Schwartz JR

Mailing Address Radiology Associates of Macon
770 Pine St Ste 290

City	State	Zip Code
Macon	GA	31201-7516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2011

Transaction ID : 42059909

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. L Daniel Strawn

Mailing Address Radiology Associates of Macon
770 Pine St Ste 290

City	State	Zip Code
Macon	GA	31201-7516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2011

Transaction ID : 42059910

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Paul Chandler

Mailing Address 770 Pine St Ste 290

City	State	Zip Code
Macon	GA	31201-7516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2011

Transaction ID : 42059912

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

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SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Christopher Minette

Mailing Address 504 Waverly Park Dr

City State Zip Code
Macon GA 31210-7571

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Macon

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2011

Transaction ID : 42059913

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Murray Relf

Mailing Address 770 Pine St Ste 250

City State Zip Code
Macon GA 31201-7510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Macon

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2011

Transaction ID : 42059914

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Jason Stephens

Mailing Address 401 RIVERMIST RD

City State Zip Code
Juliette GA 31046-3625

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Macon

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 20 / 2011

Transaction ID : 42059915

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

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750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Mark Barrow

Mailing Address 770 Saint Andrews Dr

City State Zip Code
Macon GA 31210-4769

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Macon

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 20 2011

Transaction ID : 42059916

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Michael Zinsmeister

Mailing Address 455 Wesleyan Dr

City State Zip Code
Macon GA 31210-4134

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Macon, P.C.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 20 2011

Transaction ID : 42059920

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Bert Lennington

Mailing Address 738 Byars Rd

City State Zip Code
Macon GA 31210-7405

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiology Associates of Macon

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 20 2011

Transaction ID : 42059921

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. David Cole

Mailing Address 141 Waterford Pl.

City State Zip Code
Macon GA 31210-3075

FEC ID number of contributing federal political committee.

C

Name of Employer
Radiology Associates of Macon, P.C.

Occupation
Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 20 / 2011

Transaction ID : 42059922

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Carol Collings

Mailing Address 9584 Estes Rd

City State Zip Code
Macon GA 31220-5611

FEC ID number of contributing federal political committee.

C

Name of Employer
Radiology Associates of Macon, P.C.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 20 / 2011

Transaction ID : 42059923

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Marcus Evans

Mailing Address 1786 Pine Tree Rd

City State Zip Code
Augusta GA 30904-5068

FEC ID number of contributing federal political committee.

C

Name of Employer
Medical College of Georgia

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 20 / 2011

Transaction ID : 42059924

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Tatyana Sklyarevskaya

Mailing Address 120 Broadleaf Dr

City

Macon

State

GA

Zip Code

31210-1920

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2011

Transaction ID : 42059929

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Mark Keenan

Mailing Address 12 Stirling Court

City

Macon

State

GA

Zip Code

31210-5388

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2011

Transaction ID : 42059930

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. M Jones

Mailing Address 770 Pine St Ste 290

City

Macon

State

GA

Zip Code

31201-7516

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Macon

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2011

Transaction ID : 42059931

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Richard Gregor

Mailing Address 41 Hummingbird Rd

City

Wyomissing

State

PA

Zip Code

19610-2849

FEC ID number of contributing
federal political committee.

C

Name of Employer

West Reading Radiology Assoc

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 20 / 2011

Transaction ID : 42059972

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Jeffry Ailes

Mailing Address 9311 Wildfire Rd

City

Lincoln

State

NE

Zip Code

68512-9390

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 21 / 2011

Transaction ID : 42175225

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dr. Curtis R. Burhoop

Mailing Address 2275 S 116th St

City

Walton

State

NE

Zip Code

68461-2019

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

09 / 21 / 2011

Transaction ID : 42175226

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 OF 163

(check only one)

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<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Mary Curtis

Mailing Address 10630 Cromwell Dr

City
LincolnState
NEZip Code
68516-9253FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 42175227

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. Kim Coleman

Mailing Address 2509 Wilderness Ridge Cir

City
LincolnState
NEZip Code
68512-9286FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 42175228

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dr. Rahul Razdan

Mailing Address 2009 Stillwater Dr

City
PapillionState
NEZip Code
68046-4587FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 42175229

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 57 OF 163

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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. David Kiple

Mailing Address 7601 Pioneers Blvd.

City
LincolnState
NEZip Code
68506-4675FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

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Transaction ID : 42175230

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. Michael DeWald

Mailing Address 7900 S 98th St

City
LincolnState
NEZip Code
68526-9674FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	1

Transaction ID : 42175231

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dr. William D. Ludwig

Mailing Address 5500 S 96th Pl

City
LincolnState
NEZip Code
68526-9608FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	1		2	0	1	1

Transaction ID : 42175232

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 OF 163

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Jonathan Felt

Mailing Address 9311 Thornwood Dr

City

Lincoln

State

NE

Zip Code

68512-9399

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 21 / 2011

Transaction ID : 42175233

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. John D. Pflug

Mailing Address 3111 S 120th St

City

Walton

State

NE

Zip Code

68461-2014

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 21 / 2011

Transaction ID : 42175234

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dr. Kevin GillespieMailing Address Radiology Associates PC
7601 Pioneers Blvd

City

Lincoln

State

NE

Zip Code

68506-4675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 21 / 2011

Transaction ID : 42175235

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 OF 163

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. David Schmidt

Mailing Address Radiology Associates PC
7601 Pioneers Blvd

City	State	Zip Code
Lincoln	NE	68506-4675

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2011

Transaction ID : 42175236

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. William Ingham

Mailing Address 2500 Ridge Rd

City	State	Zip Code
Lincoln	NE	68512-2418

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2011

Transaction ID : 42175237

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Dr. Michele Semin

Mailing Address 1401 W Burr Oaks Rd

City	State	Zip Code
Lincoln	NE	68523-9033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2011

Transaction ID : 42175238

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

3000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 OF 163

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Eric Vander Woude

Mailing Address 6400 Concord Cir

City

Lincoln

State

NE

Zip Code

68516-3337

FEC ID number of contributing
federal political committee.

C

Name of Employer

Advanced Medical Imaging Radiology Ass

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 21 / 2011

Transaction ID : 42175239

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Dr. Mack Bandler

Mailing Address 2656 Oak View Cir

City

Medford

State

OR

Zip Code

97504-6320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 22 / 2011

Transaction ID : 42177896

Amount of Each Receipt this Period

4000.00

Full Name (Last, First, Middle Initial)

C. Dr. Patrick Toth

Mailing Address 201 E 80th St Apt 8F

City

New York

State

NY

Zip Code

10075-0515

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary☐ General☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200092

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

5030.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. John DeMeritt

Mailing Address 18 Baldwin Rd

City

Saddle River

State

NJ

Zip Code

07458-3203

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

09 / 27 / 2011

Transaction ID : 42200093

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Rita S. Patel

Mailing Address 3 Ware Rd

City

Upper Saddle River

State

NJ

Zip Code

07458-1919

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

09 / 27 / 2011

Transaction ID : 42200094

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Dr. Mitchell Miller

Mailing Address 2 Constitution Ct Apt 1009

City

Hoboken

State

NJ

Zip Code

07030-6730

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

820.00

Date of Receipt

09 / 27 / 2011

Transaction ID : 42200095

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Sean D. Pierce

Mailing Address 509 48th Ave Apt 2A

City

Long Island City

State

NY

Zip Code

11101-5604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200096

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. George Joseph Ferrone

Mailing Address 440 E 62nd St Apt 18F

City

New York

State

NY

Zip Code

10065-8345

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200099

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Dr. Hiten Magan Malde

Mailing Address 7 Kinkaid Ave

City

Closter

State

NJ

Zip Code

07624-2908

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200100

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

90.00

SCHEDULE A (FEC Form 3X)**ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Adam Bogomol

Mailing Address 200 W 72nd St Apt 11K

City

New York

State

NY

Zip Code

10023-3267

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2011

Transaction ID : 42200101

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Harry Agress JRMailing Address Hackensack University Medical Ctr
30 Prospect Ave

City

Hackensack

State

NJ

Zip Code

07601-1914

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2011

Transaction ID : 42200102

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

c. Dr. Arthur S. Albert

Mailing Address 124 W 60th St Apt 45

City

New York

State

NY

Zip Code

10023-7451

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2011

Transaction ID : 42200103

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 OF 163

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Kavita Patel

Mailing Address 35 Annfield Ct

City	State	Zip Code
Staten Island	NY	10304-1301

FEC ID number of contributing federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2011

Transaction ID : 42200563

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Andrew Osiason

Mailing Address 506 Julie Ct

City	State	Zip Code
Wyckoff	NJ	07481-1101

FEC ID number of contributing federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2011

Transaction ID : 42200564

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

C. Dr. David Panush

Mailing Address 538 E 84th St Apt 4E

City	State	Zip Code
New York	NY	10028-7357

FEC ID number of contributing federal political committee.

C

Name of Employer
Hackensack Radiology Group

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	27	/	2011

Transaction ID : 42200565

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional)..... ►

90.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Joel Rakow

Mailing Address 505 Ivy Lane

City

Wyckoff

State

NJ

Zip Code

07481-1072

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

570.00

Date of Receipt

09 / 27 / 2011

Transaction ID : 42200566

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

B. Dr. Regina Chu

Mailing Address 15 Ogle Rd

City

Old Tappan

State

NJ

Zip Code

07675-7028

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.37

Date of Receipt

09 / 27 / 2011

Transaction ID : 42200567

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Dr. Sunitha Sunkavalli

Mailing Address 943 High Mountain Rd

City

Franklin Lakes

State

NJ

Zip Code

07417-1619

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

365.37

Date of Receipt

09 / 27 / 2011

Transaction ID : 42200568

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

68.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Margaret Emy

Mailing Address 245 Oxford Dr

City

Tenafly

State

NJ

Zip Code

07670-3117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200569

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Dr. Joel Budin

Mailing Address 140 Chestnut St

City

Englewood

State

NJ

Zip Code

07631-3033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200570

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Dr. Clement Yang

Mailing Address 555 W 59th St Apt 19E

City

New York

State

NY

Zip Code

10019-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200571

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. William Kim

Mailing Address 405 Golf Course Dr

City

Leonia

State

NJ

Zip Code

07605-1415

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200572

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Dr. Gene Han

Mailing Address 24 Briarcliff Rd

City

Tenafly

State

NJ

Zip Code

07670-2902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200574

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Dr. Robert Krugman

Mailing Address 334 W 86th St Apt 4C

City

New York

State

NY

Zip Code

10024-3157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200575

Amount of Each Receipt this Period

19.23

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

57.69

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 OF 163

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Gail Starr

Mailing Address 754 Drayton Pl

City

Rivervale

State

NJ

Zip Code

07675-6116

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

365.37

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200576

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

B. Dr. Gregory NicolaMailing Address 80 Riverside Blvd
Apt 14P

City

New York

State

NY

Zip Code

10069-0314

FEC ID number of contributing
federal political committee.

C

Name of Employer

Hackensack Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

384.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 27 / 2011

Transaction ID : 42200577

Amount of Each Receipt this Period

19.23

Full Name (Last, First, Middle Initial)

C. Dr. Michael Chaliff

Mailing Address 6000 Lake Forest Dr Ste 475

City

Atlanta

State

GA

Zip Code

30328-3898

FEC ID number of contributing
federal political committee.

C

Name of Employer

Diagnostic Imaging Specialists, P.A..

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216902

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

288.46

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. John Lohnes JR

Mailing Address Wichita Radiological Group PA
 PO Box 8903

City	State	Zip Code
Wichita	KS	67208-0903

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wichita Radiological Group PA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42216919

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Richard Satre

Mailing Address 728 134th St SW Ste 120

City	State	Zip Code
Everett	WA	98204-5322

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42216920

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Robert Rhodes III

Mailing Address 1041 Maple Ct

City	State	Zip Code
Athens	GA	30606-5746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Athens Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42216921

Amount of Each Receipt this Period

125.00

SUBTOTAL of Receipts This Page (optional)..... ►

625.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. C Randall Smith

Mailing Address 124 W Lake Ct

City

Athens

State

GA

Zip Code

30606-4655

FEC ID number of contributing
federal political committee.

C

Name of Employer

Athens Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216922

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

B. Dr. Mark LeQuire

Mailing Address 2055 Myrtlewood Dr

City

Montgomery

State

AL

Zip Code

36111-1003

FEC ID number of contributing
federal political committee.

C

Name of Employer

Montgomery Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216923

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Sean Theisen

Mailing Address 1346 Whispering Maples Ct

City

Ann Arbor

State

MI

Zip Code

48108-2492

FEC ID number of contributing
federal political committee.

C

Name of Employer

Huron Valley Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216926

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

875.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Curtis Poor

Mailing Address 2415 Eagle Cir

City
Bettendorf

State
IA

Zip Code
52722-6202

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Group PC SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216927

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Michael Shick

Mailing Address 2921 Crossfield Dr

City

Greensboro

State

NC

Zip Code

27408-6743

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Forest Univ Baptist Med C

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216928

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

C. Dr. Leonard Zawodniak

Mailing Address 1439 Garrett Dr

City

Wall Township

State

NJ

Zip Code

07719-9648

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jersey Shore Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216955

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

415.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Wilma Rodriguez-Mojica

Mailing Address Parque De Las Fuentes

690 Calle Cesar Gonzalez Apt 2403

City

San Juan

State

PR

Zip Code

00918-3901

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216956

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Dr. Howard Bear

Mailing Address 4931 Pearlman Way

City

San Diego

State

CA

Zip Code

92130-2789

FEC ID number of contributing
federal political committee.

C

Name of Employer

San Diego Imaging Medical Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216959

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Dr. Francisco Arraiza

Mailing Address 1353 Luis Vigreux

PMB 250

City

Guaynabo

State

PR

Zip Code

00966-2715

FEC ID number of contributing
federal political committee.

C

Name of Employer

Baylor College of Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216965

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

100.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Geraldine McGinty

Mailing Address 131 Avenue B Apt 3C

City
New York

State Zip Code
NY 10009-5029

FEC ID number of contributing
federal political committee.

C

Name of Employer
Montefiore Imaging Center

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216966

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dr. Lonnie Simmons

Mailing Address Gundersen/Lutheran Med Ctr
1900 South Ave C02-002

City
La Crosse

State Zip Code
WI 54601-5467

FEC ID number of contributing
federal political committee.

C

Name of Employer
Gundersen Lutheran Clinic

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216967

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Dr. Carlos Mendez-Bryan

Mailing Address 1485-2 Ashford Ave Apt 903-2

City
San Juan

State Zip Code
PR 00907-1598

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hospital Oriente Font Wartelo

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216968

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

233.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. James Webb

Mailing Address 9132 E 101st Pl

City

Tulsa

State

OK

Zip Code

74133-6912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Univ of Oklahoma Health Sci Ctr

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2250.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216969

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Jugesh Cheema

Mailing Address 2466 Oak Bend Pl

City

Newburgh

State

IN

Zip Code

47630-8053

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center of Delaware

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216971

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. Dr. Timothy Crummy

Mailing Address 2509 Middleton Beach Rd

City

Middleton

State

WI

Zip Code

53562-2912

FEC ID number of contributing
federal political committee.

C

Name of Employer

Madison Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

523.78

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216972

Amount of Each Receipt this Period

30.42

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

355.42

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. William Ray

Mailing Address 1907 Redbud Lane

City

Bloomington

State

IL

Zip Code

61704-2773

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bloomington Radiology SC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216973

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dr. Nancy Devesa-Mendez

Mailing Address Urb Montehredra
87 Brenteveo

City

San Juan

State

PR

Zip Code

00926-7007

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216974

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

c. Dr. Deborah Agisim

Mailing Address 5600 Laurium Rd

City

Charlotte

State

NC

Zip Code

28226-5610

FEC ID number of contributing
federal political committee.

C

Name of Employer

Charlotte Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42216975

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

165.00

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Fernando Zalduondo

Mailing Address San Patricio MRI & CT Ctr
280 Ave Marginal Kennedy

City Guaynabo State PR Zip Code 00968-1746

FEC ID number of contributing
federal political committee.

C

Name of Employer

San Petricio MRI & Ct Ctr

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42216999

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. Dr. Michael Brannon

Mailing Address 7 Foxglove Ct

City Greenville State SC Zip Code 29615-5505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Greenville Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42217000

Amount of Each Receipt this Period

42.00

Full Name (Last, First, Middle Initial)

C. Dr. Carl D'Orsi

Mailing Address Emory Univ Hosp
1701 Uppergate Dr 1st Fl C1104

City Atlanta State GA Zip Code 30322-0001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Emory University Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42217001

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional)..... ►

92.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. James Rawson

Mailing Address Medical College of Georgia
1120 15th St BA1414

City State Zip Code
Augusta GA 30912-0004

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical College of Georgia

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217002

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Dr. Nelson Matos

Mailing Address Urb Montehiedra
87 Calle Bientevao

City State Zip Code
San Juan PR 00926-7007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217003

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Dr. John Rogers

Mailing Address 802 West Gap Creek Road

City State Zip Code
Greer SC 29651-5065

FEC ID number of contributing
federal political committee.

C

Name of Employer
Greenville Radiology

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217006

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

150.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Raja Cheruvu

Mailing Address 165 Via Foresta Ln

City

Williamsville

State

NY

Zip Code

14221-1984

FEC ID number of contributing
federal political committee.

C

Name of Employer

Windsong Radiology Group

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

875.04

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217007

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Dr. Alfred Mansour JR

Mailing Address Central LA Imaging Inc
3704 North Blvd Ste A

City

Alexandria

State

LA

Zip Code

71301-3658

FEC ID number of contributing
federal political committee.

C

Name of Employer

Central LA Imaging Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.06

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217009

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Dr. Raul de la Vega III

Mailing Address 2936 Grampian Dr

City

Gastonia

State

NC

Zip Code

28054-6402

FEC ID number of contributing
federal political committee.

C

Name of Employer

Shelby Radiological Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217010

Amount of Each Receipt this Period

42.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

175.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Gregory Galdino

Mailing Address 9 Applestone Dr

City State Zip Code
 Jackson TN 38305-6919

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Jackson Radiology Associates

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.01

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 30 2011

Transaction ID : 42217011

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. Dr. Mark Wittry

Mailing Address 10525 Concord School Rd

City State Zip Code
 Saint Louis MO 63128-1232

FEC ID number of contributing
federal political committee.

C

Name of Employer
 West County Radiological Group, Inc.

Occupation
 Cardiac Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

765.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 30 2011

Transaction ID : 42217012

Amount of Each Receipt this Period

85.00

Full Name (Last, First, Middle Initial)

C. Dr. W Shawn Conwell

Mailing Address 293 Piney Bluff Rd

City State Zip Code
 Rembert SC 29128-9630

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Pitts Radiology

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

3125.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 30 2011

Transaction ID : 42217013

Amount of Each Receipt this Period

625.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

760.00

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. James Bezreh

Mailing Address South Shore Hospital
55 Fogg Rd

City State Zip Code
South Weymouth MA 02190-2432

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Shore Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.72

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217014

Amount of Each Receipt this Period

111.12

Full Name (Last, First, Middle Initial)

B. Dr. Van Wadlington

Mailing Address 3805 Knollwood Ln

City State Zip Code
Birmingham AL 35243-5913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Birmingham, P.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217016

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Dr. Elsie Cintron

Mailing Address Urb San Francisco
125 Aleli St

City State Zip Code
San Juan PR 00927-6306

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAMC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42217018

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

236.12

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Martin Schwartz

Mailing Address Radiology Associates of Birmingham
 2090 Columbiana Rd Ste 4400

City Vestavia State AL Zip Code 35216-2152

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiology Associates of Birmingham, PC

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42217020

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dr. Joseph Barry

Mailing Address 161 Nathan Ln

City Carlisle State MA Zip Code 01741-1340

FEC ID number of contributing
federal political committee.

C

Name of Employer

Commonwealth Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42217024

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. Dr. Amy Kirby

Mailing Address 14708 Hollyhock Dr

City Oklahoma City State OK Zip Code 73142-1804

FEC ID number of contributing
federal political committee.

C

Name of Employer

Eagle Eye Imaging

Occupation

Radiology Resident

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1950.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42217025

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

325.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Demetrius Morros

Mailing Address 7418 Ridgcrest Court Rd

City

Vestavia Hls

State

AL

Zip Code

35242-0525

FEC ID number of contributing
federal political committee.

C

Name of Employer

Birmingham Radiological Group P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.06

Date of Receipt

09 / 30 / 2011

Transaction ID : 42217026

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

B. Dr. Reuben Rock

Mailing Address 41 Country Club Dr

City

Woodbridge

State

CT

Zip Code

06525-2509

FEC ID number of contributing
federal political committee.

C

Name of Employer

Jefferson Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42218536

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Nicole Abinanti-Kotula

Mailing Address 4531 Parview Drive North

City

Charlotte

State

NC

Zip Code

28226-3450

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242427

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

354.34

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Robert Barr

Mailing Address Mecklenburg Radiology Assoc
PO Box 221249

City State Zip Code
Charlotte NC 28222-1249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

979.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242428

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Dr. John Black

Mailing Address 19825 River Falls Dr

City State Zip Code
Davidson NC 28036-8869

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242429

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Dr. Martin Burns

Mailing Address 2026 Beverly Drive

City State Zip Code
Charlotte NC 28207-2602

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242430

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

63.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Kevin W. Carroll

Mailing Address 2006 Floral Ave

City

Charlotte

State

NC

Zip Code

28203-6022

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242431

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Dr. Steven Jenkins

Mailing Address 6805 Honors Ct

City

Charlotte

State

NC

Zip Code

28210-4211

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242432

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Dr. Brian H. Hamilton

Mailing Address 7211 Seton House Ln

City

Charlotte

State

NC

Zip Code

28277-4505

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Rad Assoc

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242433

Amount of Each Receipt this Period

21.00

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63.00

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Victor Ho

Mailing Address 4539 Mullens Ford Rd

City

Charlotte

State

NC

Zip Code

28226-5038

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242434

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Dr. Bennett Hollenberg

Mailing Address 3738 Abingdon Rd

City

Charlotte

State

NC

Zip Code

28211-3747

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242435

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Dr. Erik Insko

Mailing Address 9120 Easton Grey Ln

City

Charlotte

State

NC

Zip Code

28277-2819

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of PA

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242436

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

63.00

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Gregory Joseph

Mailing Address 2601 Sedley Rd

City State Zip Code
 Charlotte NC 28211-3656

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mecklenburg Radiology Associates

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242437

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Dr. Andrew Kapustin

Mailing Address 2608 Flintgrove Rd

City State Zip Code
 Charlotte NC 28226-5619

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mecklenburg Radiology Associates

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242438

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Dr. Frank Kosarek

Mailing Address PO Box 221249

City State Zip Code
 Charlotte NC 28222-1249

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Mecklenburg Radiology Associates, P.A.

Occupation
 Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242439

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

63.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. John Nixon

Mailing Address 2126 Edenton Rd

City

Charlotte

State

NC

Zip Code

28211-3852

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242440

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Dr. Robert QuarlesMailing Address Mecklenburg Radiology Assoc
PO Box 221249

City

Charlotte

State

NC

Zip Code

28222-1249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Assoc

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242441

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Dr. Shawn Quillin

Mailing Address 4522 N Parview Dr

City

Charlotte

State

NC

Zip Code

28226-3449

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242442

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

63.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Daniel Scanga

Mailing Address 3031 Wickersham Rd

City

Charlotte

State

NC

Zip Code

28211-3222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Vanderbilt Univ Med Ctr-Vanderbi

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242443

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Dr. David Scovill

Mailing Address 127 Wild Harbor Rd

City

Mooresville

State

NC

Zip Code

28117-6038

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242444

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Dr. Paul Tobben

Mailing Address 4810 Gaynor Rd

City

Charlotte

State

NC

Zip Code

28211-3023

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mecklenburg Radiology Associates, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242445

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

63.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Donald Toothman

Mailing Address 18307 Bowsprit Pointe Road

City State Zip Code
Cornelius NC 28031-5202

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mecklenburg Radiology Assoc

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242446

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

B. Dr. Daniel Uri

Mailing Address 5001 Kimblewyck Ln

City State Zip Code
Charlotte NC 28226-6465

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mecklenburg Radiology Associates

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242447

Amount of Each Receipt this Period

21.00

Full Name (Last, First, Middle Initial)

C. Dr. Thomas Zban

Mailing Address 2051 Brandon Cir

City State Zip Code
Charlotte NC 28211-1650

FEC ID number of contributing
federal political committee.

C

Name of Employer
Mecklenburg Radiology Associates, P.A.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242448

Amount of Each Receipt this Period

21.00

SUBTOTAL of Receipts This Page (optional)..... ►

63.00

TOTAL This Period (last page this line number only)..... ►

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Vipin Bansal

Mailing Address Radiological Assoc of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242451

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Dr. Garyun Blackmon

Mailing Address 8370 Rustic Woods Way

City State Zip Code
Loomis CA 95650-8038

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242485

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. George Bolton

Mailing Address 133 Yankton St

City State Zip Code
Folsom CA 95630-8140

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242486

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Jonathan Breslau

Mailing Address 2690 Azalea Rd

City

Sacramento

State

CA

Zip Code

95864-4902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Associates of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2040.12

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242487

Amount of Each Receipt this Period

680.04

Full Name (Last, First, Middle Initial)

B. Dr. Nicole Carbo

Mailing Address Rad Assoc of Sacramento
1500 Expo Pkwy

City

Sacramento

State

CA

Zip Code

95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242488

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

c. Dr. Christopher Chong

Mailing Address 27075 E El Macero

City

El Macero

State

CA

Zip Code

95618-1006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242489

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

1130.04

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Huu-Ninh Dao

Mailing Address 2627 Rockwell Dr

City

Davis

State

CA

Zip Code

95618-7664

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Associates of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242490

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. John De la Vega

Mailing Address Rad Assoc of Sacramento
1500 Expo Pkwy

City

Sacramento

State

CA

Zip Code

95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1875.06

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242491

Amount of Each Receipt this Period

625.02

Full Name (Last, First, Middle Initial)

C. Dr. Roland DeMarco

Mailing Address 5174 Prior Rdg

City

Granite Bay

State

CA

Zip Code

95746-7186

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242492

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

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1075.02

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Scott Foster

Mailing Address Radiological Assoc of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242494

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. Hani Greiss

Mailing Address Roseville Imaging
1640 E Roseville Pkwy Ste 100

City State Zip Code
Roseville CA 95661-3922

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242495

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. Patrick Harty

Mailing Address 5249 Wyndham Oak Ln

City State Zip Code
Carmichael CA 95608-3472

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242496

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Glenn Hofer

Mailing Address Rad Assoc of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rad Assoc of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242497

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. Christopher Hoffman

Mailing Address 1117 Teneighth Way

City State Zip Code
Sacramento CA 95818-4024

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242498

Amount of Each Receipt this Period

252.00

Full Name (Last, First, Middle Initial)

C. Dr. Jeffrey Kuo

Mailing Address 2619 Mariella Dr

City State Zip Code
Rocklin CA 95765-5618

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242499

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

852.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Don Charles Loomer

Mailing Address 1747 E Wallington Ln

City

Fresno

State

CA

Zip Code

93730-3596

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242500

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. Vartan Malian

Mailing Address 100 Crane Meadow Ct

City

Roseville

State

CA

Zip Code

95661-4030

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242501

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. Mylon Marshall

Mailing Address 2201 Lassen Pl

City

Davis

State

CA

Zip Code

95616-6604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242502

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

900.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Charles McDonnell III

Mailing Address 5436 Ridge Park Dr

City State Zip Code
Loomis CA 95650-7701

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242503

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. Miyuki Murphy

Mailing Address 5198 Prior Rdg

City State Zip Code
Granite Bay CA 95746-7186

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242504

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dr. Michael Norton

Mailing Address Rad Assoc of Sacramento Med Grp
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rad Assoc of Sacramento Med Gr

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242505

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Narasimhachari Raghavan

Mailing Address 3157 Oak Cliff Cir

City

Carmichael

State

CA

Zip Code

95608-4571

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242506

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Dr. Christopher Schaefer

Mailing Address 1500 Expo Pkwy.

City

Sacramento

State

CA

Zip Code

95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242507

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. Albert Schraner

Mailing Address 5300 Tufts St

City

Davis

State

CA

Zip Code

95618-7219

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242508

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Christopher Simopoulos

Mailing Address Rad Assoc of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242509

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. James Steidler

Mailing Address 1806 Vela Pl

City State Zip Code
Davis CA 95618-6760

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242510

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. Bahram Varjavand

Mailing Address 1501 Chalupa Pl

City State Zip Code
Davis CA 95618-6757

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242511

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Calvin Wang

Mailing Address Rad Assoc of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242512

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Dr. David Winfield

Mailing Address 1500 Expo Pkwy.

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242514

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. Dylan Witt

Mailing Address 3636 Washoe St

City State Zip Code
Davis CA 95618-5087

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242515

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Frederic Conte

Mailing Address 918 Colby Dr

City

Davis

State

CA

Zip Code

95616-1758

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242516

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Dr. Benjamin Franc

Mailing Address Radiological Assoc of Sacramento
1500 Expo Pkwy

City

Sacramento

State

CA

Zip Code

95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer

University of California

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242517

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. Richard W. Myers

Mailing Address Radiological Associates of Sacrame
1500 Expo Pkwy

City

Sacramento

State

CA

Zip Code

95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer

Radiological Associates of Sacramento

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242518

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Sharon Dutton

Mailing Address Rad Assoc of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242519

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. Roger Gilbert

Mailing Address 1500 Expo Pkwy.

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242520

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. Dr. Brian Goldsmith

Mailing Address Radiological Assoc of Sacramento
2800 L St Ste 10

City State Zip Code
Sacramento CA 95816-5616

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242521

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Christopher Jones

Mailing Address Radiological Assoc of Sacramento
 2800 L St Ste 10

City State Zip Code
 Sacramento CA 95816-5616

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Radiological Assoc. of Sacramento

Occupation
 Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242522

Amount of Each Receipt this Period

240.00

Full Name (Last, First, Middle Initial)

B. Dr. Susan Lee

Mailing Address 1500 Expo Pkwy.

City State Zip Code
 Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Radiological Assoc. of Sacramento

Occupation
 Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1800.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242523

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C. Dr. David Linstadt

Mailing Address 2 Medical Plaza Drive
 Suite 180

City State Zip Code
 Roseville CA 95661-3049

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Radiation Oncology Centers

Occupation
 Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242524

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1140.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Mark Logsdon

Mailing Address Rad Associates of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242525

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. Anthony Pu

Mailing Address Radiological Assoc of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc of Sacramen

Occupation
Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242526

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dr. Seth Rosenthal

Mailing Address Rad Assoc of Sacramento
1500 Expo Pkwy

City State Zip Code
Sacramento CA 95815-4227

FEC ID number of contributing
federal political committee.

C

Name of Employer
Radiological Assoc. of Sacramento

Occupation
Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242527

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

600.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Janice Ryu

Mailing Address 2090 8th Ave

City	State	Zip Code
Sacramento	CA	95818-4211

FEC ID number of contributing federal political committee.

C

Name of Employer

Self-Employed

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42242528

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Dr. Harvey WolkovMailing Address Radiation Oncology Center
2800 L St Ste 10

City	State	Zip Code
Sacramento	CA	95816-5616

FEC ID number of contributing federal political committee.

C

Name of Employer

Radiological Assoc. of Sacramento Med C

Occupation

Radiation Oncologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42242529

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. Michael Atalay

Mailing Address 70 Bailey Blvd

City	State	Zip Code
East Greenwich	RI	02818-1454

FEC ID number of contributing federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42242531

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

520.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Michael Beland

Mailing Address 10 Keyes Ct

City

East Greenwich

State

RI

Zip Code

02818-1450

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242532

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Jerrold Boxerman

Mailing Address 24 Eisenhower Dr

City

Sharon

State

MA

Zip Code

02067-2413

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242533

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Jeffrey Brody

Mailing Address Rhode Island Hospital
593 Eddy St

City

Providence

State

RI

Zip Code

02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242534

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. John Cassese

Mailing Address 200 Boulder Way

City

East Greenwich

State

RI

Zip Code

02818-5101

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242535

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Kevin Chang

Mailing Address 73 Norwood St

City

Sharon

State

MA

Zip Code

02067-1262

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242536

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. John Cronan

Mailing Address 6 Atlantic Crossing

City

Barrington

State

RI

Zip Code

02806-2358

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242537

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

800.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Lawrence Davis

Mailing Address 5 Veritas Way

City

Barrington

State

RI

Zip Code

02806-2751

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242538

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Linda Donegan

Mailing Address 125 Juniper Dr

City

East Greenwich

State

RI

Zip Code

02818-1371

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242539

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Gregory Dubel

Mailing Address Brown Univ-Rhode Island Hosp
593 Eddy St

City

Providence

State

RI

Zip Code

02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242540

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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 (check only one)

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Damian Dupuy
 Mailing Address Rhode Island Hospital
 593 Eddy St

City	State	Zip Code
Providence	RI	02903-4923

FEC ID number of contributing federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242541

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Peter Evangelista

Mailing Address 24 Kayla Ricci Way

City	State	Zip Code
Saunderstown	RI	02874-1625

FEC ID number of contributing federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242542

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Holly Gil

Mailing Address 17 Adams Point Rd

City	State	Zip Code
Barrington	RI	02806-5005

FEC ID number of contributing federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242543

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Richard Gold

Mailing Address 200 Exchange St Unit 1216

City

Providence

State

RI

Zip Code

02903-2624

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242544

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Daniel Golding

Mailing Address 6 Tina Court

City

East Greenwich

State

RI

Zip Code

02818-1391

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging I

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242545

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. David Grand

Mailing Address 21 Westford Rd

City

Providence

State

RI

Zip Code

02906-4943

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242546

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Richard Haas

Mailing Address 405 Seaside Dr

City

Jamestown

State

RI

Zip Code

02835-2376

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242547

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Christopher Hampson

Mailing Address 39 Sunset Dr

City

Barrington

State

RI

Zip Code

02806-2539

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242548

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Terrance Healey

Mailing Address 88 Amy Dr

City

Cranston

State

RI

Zip Code

02921-1704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242549

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Thaddeus Herliczek

Mailing Address 14 Winterberry Lane

City

Westport

State

MA

Zip Code

02790-2638

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	1		

Transaction ID : 42242550

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dr. Mary Hillstrom

Mailing Address 5 Whitney Dr

City

Lincoln

State

RI

Zip Code

02865-4639

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	1		

Transaction ID : 42242551

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Jason Iannuccilli

Mailing Address 28 Marigold Cir

City

North Providence

State

RI

Zip Code

02904-3891

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	9		3	0		2	0	1	1		

Transaction ID : 42242552

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

1000.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Abdel Jaffan

Mailing Address 131 Federal Way Apt 304

City

Johnston

State

RI

Zip Code

02919-4664

FEC ID number of contributing
federal political committee.

C

Name of Employer

RI Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242553

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Bryan Jay

Mailing Address 9 Harbour Rd

City

Barrington

State

RI

Zip Code

02806-4410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242554

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Mahesh Jayaraman

Mailing Address 4 Kingsbury Ln

City

Foxboro

State

MA

Zip Code

02035-3206

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242555

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 113 OF 163

(check only one)

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Hanan Khalil

Mailing Address Rhode Island Medical Imaging Inc
20 Catamore Blvd

City	State	Zip Code
East Providence	RI	02914-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Bridgeport Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242556

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Susan Koelliker

Mailing Address 5 Lighthouse Ln

City	State	Zip Code
Barrington	RI	02806-2829

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242557

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Elizabeth Lazarus

Mailing Address 9 Half Mile Rd

City	State	Zip Code
Barrington	RI	02806-4113

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42242559

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Scott Levine

Mailing Address Rhode Island Hospital
593 Eddy St

City State Zip Code
Providence RI 02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rhode Island Medical Imaging

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242560

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Ana Lourenco

Mailing Address 7 Weston Ave

City State Zip Code
Foxboro MA 02035-1863

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rhode Island Medical Imaging

Occupation
Resident

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242561

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Martha Mainiero

Mailing Address Rhode Island Hospital
593 Eddy St

City State Zip Code
Providence RI 02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer
Rhode Island Medical Imaging

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242562

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. William Mayo-Smith

Mailing Address Rhode Island Hospital
593 Eddy St

City State Zip Code
Providence RI 02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242563

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Kathleen McCarten

Mailing Address 12 Oak Hill Dr

City State Zip Code
Lincoln RI 02865-1021

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Med Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242564

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Jonathan Movson

Mailing Address 381 Wayland Ave

City State Zip Code
Providence RI 02906-4667

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242565

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Brian Murphy

Mailing Address 81 Mathewson Rd

City

Barrington

State

RI

Zip Code

02806-4429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242566

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. David Neumann

Mailing Address 20 Pardons Wood Ln

City

East Greenwich

State

RI

Zip Code

02818-1446

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242567

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Arthur Noel

Mailing Address Rhode Island Medical Imaging Inc
20 Catamore Blvd

City

East Providence

State

RI

Zip Code

02914-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242568

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Richard Noto

Mailing Address 1 Ferncliffe Rd

City

Barrington

State

RI

Zip Code

02806-4017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42242569

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. John Pezzullo

Mailing Address 175 Downing Dr

City

Johnston

State

RI

Zip Code

02919-6441

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42242570

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Marcelle PiccolelloMailing Address Rhode Island Medical Imaging
PO Box 14717

City

East Providence

State

RI

Zip Code

02914-0717

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42242571

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

750.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Ethan Prince

Mailing Address 15 Wheeler Ave

City

Cranston

State

RI

Zip Code

02905-4034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Resident

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242572

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Mark Ridlen

Mailing Address Rhode Island Medical Imaging
20 Catamore Blvd

City

East Providence

State

RI

Zip Code

02914-1204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242573

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Dr. Jeffrey Rogg

Mailing Address 60 Pheasant Dr

City

East Greenwich

State

RI

Zip Code

02818-1348

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242574

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Michael Ryvicker

Mailing Address 46 Alton Rd

City

Providence

State

RI

Zip Code

02906-4704

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242575

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Gregory Soares

Mailing Address Rhode Island Hospital
593 Eddy St

City

Providence

State

RI

Zip Code

02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

RI Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242576

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

c. Dr. Julie Song

Mailing Address 9 Lu Stubbs Ln

City

Sharon

State

MA

Zip Code

02067-2367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242577

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Patricia Spencer

Mailing Address Women & Infants Hospital

101 Dudley St Floor 0 Rm 0615

City

Providence

State

RI

Zip Code

02905-2401

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242578

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Glenn Tung

Mailing Address 12 Knife Shop Ln

City

Sharon

State

MA

Zip Code

02067-2274

FEC ID number of contributing
federal political committee.

C

Name of Employer

Brown Univ Sch of Medicine

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242579

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Dr. Michael Wallach

Mailing Address Rhode Island Hospital

593 Eddy St

City

Providence

State

RI

Zip Code

02903-4923

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Hospital

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242580

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

750.00

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Don Yoo

Mailing Address 10 Wood Duck Ct

City

East Greenwich

State

RI

Zip Code

02818-1350

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rhode Island Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242581

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Dr. Glenn Cook

Mailing Address Scottsdale Med Imaging Ltd
3501 N Scottsdale Rd Ste 130

City

Scottsdale

State

AZ

Zip Code

85251-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242582

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dr. Geoffrey Criqui

Mailing Address Southwest Diagnostic Imaging
PO Box 3114

City

Scottsdale

State

AZ

Zip Code

85271-3114

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242583

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

475.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Michael Bruce Gotway

Mailing Address 9509 East Desert Cove

City

Scottsdale

State

AZ

Zip Code

85260-6164

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242584

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. Dr. William Horsley

Mailing Address Scottsdale Medical Imaging Ltd
3501 N Scottsdale Rd Ste 130

City

Scottsdale

State

AZ

Zip Code

85251-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242585

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dr. William Jones

Mailing Address 9477 E Shangri LA Rd

City

Scottsdale

State

AZ

Zip Code

85260-6143

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242586

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

525.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Mark Keiper

Mailing Address Scottsdale Medical Imaging

3501 N Scottsdale Rd Ste 130

City

Scottsdale

State

AZ

Zip Code

85251-5649

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southwest Diagnostic Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242587

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Dr. Ronald Korn

Mailing Address 6419 E Caron Dr

City

Paradise Valley

State

AZ

Zip Code

85253-1862

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242588

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dr. Mark Kuo

Mailing Address 13026 E Turquoise Ave

City

Scottsdale

State

AZ

Zip Code

85259-5341

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242589

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

450.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Daniel Maki

Mailing Address 9944 E South Bend Dr

City

Scottsdale

State

AZ

Zip Code

85255-2538

FEC ID number of contributing
federal political committee.

C

Name of Employer

Southwest Diagnostic Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242590

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dr. Christopher May

Mailing Address 14627 E Paradise Dr

City

Fountain Hills

State

AZ

Zip Code

85268-6157

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Imaging Associates

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242591

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

C. Dr. Raymond Murphy

Mailing Address 13234 E Paradise Dr

City

Scottsdale

State

AZ

Zip Code

85259-3644

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242592

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

345.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Sunil Ram

Mailing Address 12455 N 118th Way

City

Scottsdale

State

AZ

Zip Code

85259-2718

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242594

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. Dr. Terry Reeves

Mailing Address 10537 E Sunnyside Dr

City

Scottsdale

State

AZ

Zip Code

85259-2917

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242595

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. Chad Palmer

Mailing Address 10678 E Palm Ridge Dr

City

Scottsdale

State

AZ

Zip Code

85255-1717

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242596

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)..... ►

570.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. William Taylor

Mailing Address 4045 E Desert Crest Dr

City

Paradise Valley

State

AZ

Zip Code

85253-3942

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242597

Amount of Each Receipt this Period

105.00

Full Name (Last, First, Middle Initial)

B. Dr. Rodney Owen

Mailing Address 9122 N 60th St

City

Paradise Valley

State

AZ

Zip Code

85253-1735

FEC ID number of contributing
federal political committee.

C

Name of Employer

Scottsdale Medical Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

810.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242598

Amount of Each Receipt this Period

270.00

Full Name (Last, First, Middle Initial)

C. Dr. John Campbell

Mailing Address 1416 Watersedge Dr

City

Virginia Beach

State

VA

Zip Code

23452-6222

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242599

Amount of Each Receipt this Period

166.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

541.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Theodore Dorsay

Mailing Address 1500 Chandon Cres

City

Virginia Beach

State

VA

Zip Code

23454-1367

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists, Inc.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

640.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242600

Amount of Each Receipt this Period

160.00

Full Name (Last, First, Middle Initial)

B. Dr. Lauren Granata

Mailing Address 1317 Five Point Rd

City

Virginia Beach

State

VA

Zip Code

23454-1930

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

668.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242601

Amount of Each Receipt this Period

167.00

Full Name (Last, First, Middle Initial)

C. Dr. Michael Ho

Mailing Address Medical Center Radiology Inc
5544 Greenwich Rd Ste 200

City

Virginia Beach

State

VA

Zip Code

23462-6563

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists, I

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

666.64

Date of Receipt

09 / 30 / 2011

Transaction ID : 42242602

Amount of Each Receipt this Period

166.66

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

493.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Lester Johnson

Mailing Address 1021 Downshire Chase

City State Zip Code
Virginia Beach VA 23452-6154

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical Center Radiologists, Inc.

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242603

Amount of Each Receipt this Period

166.66

Full Name (Last, First, Middle Initial)

B. Dr. David Kushner

Mailing Address 2020 Canal Rd

City State Zip Code
Virginia Beach VA 23451-1615

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical Center Radiologists

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242604

Amount of Each Receipt this Period

166.00

Full Name (Last, First, Middle Initial)

C. Dr. Karah Lanier

Mailing Address 1503 S sea Breeze Trl

City State Zip Code
Virginia Beach VA 23452-4730

FEC ID number of contributing
federal political committee.

C

Name of Employer
Medical Center Radiologists

Occupation
Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

680.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242605

Amount of Each Receipt this Period

170.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

502.66

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Phillip Luebbert

Mailing Address 9528 25th Bay St

City

Norfolk

State

VA

Zip Code

23518-1812

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

666.64

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242606

Amount of Each Receipt this Period

166.66

Full Name (Last, First, Middle Initial)

B. Dr. Richard Thomas

Mailing Address 1431 Kemp Bridge Ln

City

Chesapeake

State

VA

Zip Code

23320-5056

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists, Inc

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

333.36

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242607

Amount of Each Receipt this Period

83.34

Full Name (Last, First, Middle Initial)

C. Dr. Jennifer Weaver

Mailing Address 1029 Assembly Dr

City

Virginia Beach

State

VA

Zip Code

23454-2874

FEC ID number of contributing
federal political committee.

C

Name of Employer

Medical Center Radiologists

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242608

Amount of Each Receipt this Period

166.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

416.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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PAGE 130 OF 163

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Jeffrey Freeman

Mailing Address 14924 Montclair Dr

City

Westfield

State

IN

Zip Code

46074-8123

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summit Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242615

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Dr. Andre' Stovall

Mailing Address 10865 S 700 E 92

City

Roanoke

State

IN

Zip Code

46783-9231

FEC ID number of contributing
federal political committee.

C

Name of Employer

Summit Radiology, P.C.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42242632

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Dr. Richard Bird

Mailing Address 2701 Glenwood Gardens Ln Unit 303

City

Raleigh

State

NC

Zip Code

27608-1399

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42260165

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional)..... ►

275.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Holly Burge

Mailing Address 14248 Wyndfield Circle

City	State	Zip Code
Raleigh	NC	27615-1317

FEC ID number of contributing federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42260166

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dr. George CoatesMailing Address Wake Radiology & Consultants
PO Box 19368

City	State	Zip Code
Raleigh	NC	27619-9368

FEC ID number of contributing federal political committee.

C

Name of Employer

Wake Radiology & Consultants

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42260167

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. Karen Coates

Mailing Address 106 Baybrook Ct

City	State	Zip Code
Cary	NC	27518-9422

FEC ID number of contributing federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42260168

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

360.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Joseph Cornett

Mailing Address 113 Arrowstone Ct

City
MorrisvilleState
NCZip Code
27560-6977FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42260169

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dr. Alan Fein

Mailing Address 652 Pendleton Lake Road

City
RaleighState
NCZip Code
27614-9093FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Diagnostic Imaging

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42260170

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. Paul Haugan

Mailing Address 3021 Cranesbill Dr

City
RaleighState
NCZip Code
27613-6579FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42260172

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

360.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Lyndon Jordan III

Mailing Address 2301 White Oak Rd

City

Raleigh

State

NC

Zip Code

27608-1455

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42260173

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dr. Susan Kennedy

Mailing Address 1709 Knox Rd

City

Raleigh

State

NC

Zip Code

27608-1150

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42260174

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. Peter Leuchtmann

Mailing Address 131 Magnolia Breeze Ct

City

Apex

State

NC

Zip Code

27502-3790

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

Transaction ID : 42260176

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

360.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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(check only one)

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. David Ling

Mailing Address Wake Radiology
PO Box 19368

City Raleigh State NC Zip Code 27619-9368

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42260177

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Dr. John Matzko

Mailing Address Wake Radiology
3949 Browning Pl

City Raleigh State NC Zip Code 27609-6536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42260178

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. Richard Max

Mailing Address 113 Baybrook Ct

City Cary State NC Zip Code 27518-9422

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42260179

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

390.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Joseph Melamed

Mailing Address 220 Gilliam St

City
OxfordState
NCZip Code
27565-3310FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42260182

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dr. Carroll Overton

Mailing Address 1709 Knox Rd

City
RaleighState
NCZip Code
27608-1150FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42260185

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

c. Dr. Charles Pope

Mailing Address 1408 Olive Chapel Road

City
ApexState
NCZip Code
27502-8511FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42260186

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

360.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Philip Pretter

Mailing Address 12325 Camberwell Ct

City

Raleigh

State

NC

Zip Code

27614-8933

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42260189

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dr. Michael Ross

Mailing Address 2901 Fairview Rd

City

Raleigh

State

NC

Zip Code

27608-1129

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42260190

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. Philip Saba

Mailing Address 1017 Heyden Ct

City

Raleigh

State

NC

Zip Code

27614-7250

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

09 / 30 / 2011

Transaction ID : 42260191

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

360.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 137 OF 163

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. Robert Schaaf

Mailing Address Wake Radiology
3949 Browning Pl

City Raleigh State NC Zip Code 27609-6536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42260192

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dr. John Spargo

Mailing Address Wake Radiology
3949 Browning Pl

City Raleigh State NC Zip Code 27609-6536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants, P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42260194

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. William Vanarthos

Mailing Address Wake Radiology Consultants P.A.
3949 Browning Pl

City Raleigh State NC Zip Code 27609-6536

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology Consultants P.A.

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42260195

Amount of Each Receipt this Period

120.00

SUBTOTAL of Receipts This Page (optional)..... ►

360.00

TOTAL This Period (last page this line number only)..... ►

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 OF 163

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Dr. William Way JR

Mailing Address 7713 Oakmont Pl

City

Raleigh

State

NC

Zip Code

27615-5492

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42260196

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

B. Dr. Andrew Wu

Mailing Address 8729 Valentine Ct

City

Raleigh

State

NC

Zip Code

27615-5830

FEC ID number of contributing
federal political committee.

C

Name of Employer

Wake Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 30 / 2011

Transaction ID : 42260198

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. Dr. James Jelinek

Mailing Address Washington Hospital Center
110 Irving St NW BA94

City

Washington

State

DC

Zip Code

20010-3017

FEC ID number of contributing
federal political committee.

C

Name of Employer

Center Radiology

Occupation

Diagnostic Radiologist

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

405.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2011

Transaction ID : 42605032

Amount of Each Receipt this Period

45.00

SUBTOTAL of Receipts This Page (optional)..... ►

285.00

TOTAL This Period (last page this line number only)..... ►

84397.05

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Joe Heck

Mailing Address PO Box 750114

City	State	Zip Code
Las Vegas	NV	89136

Purpose of Disbursement

011

Candidate Name

Mr. Joe Heck

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41163242

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Snowe For Senate

Mailing Address P.O. Box 2006

City	State	Zip Code
Portland	ME	04104

Purpose of Disbursement

011

Candidate Name

Sen. Olympia J. Snowe

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: ME District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2011

Transaction ID : 41178280

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Conservative Opportunities for a New America PAC (CONA-PAC)Mailing Address 110 W Louisiana Avenue
Suite 312

City	State	Zip Code
Midland	TX	79701

Purpose of Disbursement

011

Candidate Name

Conservative Opportunities for a New America PAC (CONA-PAC)

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41178283

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 163

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Gardner For Congress 2012

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Mailing Address PO Box 2408

City	State	Zip Code
Loveland	CO	80539

Transaction ID : 41178285

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Rep. Cory GardnerCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 04

5000.00

Full Name (Last, First, Middle Initial)

B. Cathy McMorris Rodgers For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Mailing Address Box 137

City	State	Zip Code
Spokane	WA	99210

Transaction ID : 41178295

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Rep. Cathy McMorris RodgersCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 05

1000.00

Full Name (Last, First, Middle Initial)

C. CMR PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Mailing Address P.O. Box 2485

City	State	Zip Code
Springfield	VA	22152

Transaction ID : 41178296

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

CMR PACCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 163

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Kinzinger For Congress

Mailing Address PO Box 1050

City	State	Zip Code
Bourbonnais	IL	60914

Purpose of Disbursement

011

Candidate Name

Mr. Adam KinzingerOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178320

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

B. Friends Of Nan Hayworth

Mailing Address P. O. Box 189

City	State	Zip Code
Mount Kisco	NY	10549

Purpose of Disbursement

011

Candidate Name

Ms. Nan HayworthOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178459

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Friends Of Nan Hayworth

Mailing Address P. O. Box 189

City	State	Zip Code
Mount Kisco	NY	10549

Purpose of Disbursement

011

Candidate Name

Ms. Nan HayworthOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☐ Primary ☒ General
☐ Other (specify) ▼

State: NY District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178460

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 142 OF 163

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Hoosiers For Rokita, Inc.

Mailing Address 7643 East U.S. 36

City	State	Zip Code
Avon	IN	46123

Purpose of Disbursement

011

Candidate Name

Rep. Todd RokitaCategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178470

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Martha Roby For Congress

Mailing Address PO Box 195

City	State	Zip Code
Montgomery	AL	36101

Purpose of Disbursement

011

Candidate Name

Ms. Martha RobyCategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: AL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178481

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Friends Of Joe Heck

Mailing Address PO Box 750114

City	State	Zip Code
Las Vegas	NV	89136

Purpose of Disbursement

011

Candidate Name

Mr. Joe HeckCategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178488

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 163

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Joe Heck

Mailing Address PO Box 750114

City	State	Zip Code
Las Vegas	NV	89136

Purpose of Disbursement

011

Candidate Name

Mr. Joe Heck

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NV District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178489

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Tom Reed For Congress

Mailing Address 221 Washington Street

City	State	Zip Code
Corning	NY	14830

Purpose of Disbursement

011

Candidate Name

Rep. Tom Reed

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NY District: 29

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178492

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. Renee Ellmers For Congress Committee

Mailing Address P.O. Box 904

City	State	Zip Code
Dunn	NC	28335

Purpose of Disbursement

011

Candidate Name

Rep. Renee Ellmers

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NC District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41178496

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bucshon For Congress

Mailing Address PO Box 250

City	State	Zip Code
Newburgh	IN	47629

Purpose of Disbursement

011

Candidate Name

Mr. Larry Bucshon

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: IN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41178503

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Jim Jordan For Congress

Mailing Address 1709 State Route 560 South

City	State	Zip Code
Urbana	OH	43078

Purpose of Disbursement

011

Candidate Name

Rep. Jim Jordan

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OH District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41178513

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Cantor For Congress

Mailing Address P. O. Box 17813

City	State	Zip Code
Richmond	VA	23226

Purpose of Disbursement

011

Candidate Name

Rep. Eric I. Cantor

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: VA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41178521

Amount of Each Disbursement this Period

3500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Devin Nunes Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Mailing Address PO Box 6545

City	State	Zip Code
Visalia	CA	93290

Transaction ID : 41178526

Purpose of Disbursement

011

Amount of Each Disbursement this Period

2500.00

Candidate Name

Rep. Devin G. NunesCategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 21

Full Name (Last, First, Middle Initial)

B. NEW PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Mailing Address P.O. BOX 7480

City	State	Zip Code
VISALIA	CA	93290

Transaction ID : 41178527

Purpose of Disbursement

011

Amount of Each Disbursement this Period

2500.00

Candidate Name

NEW PACCategory/
Type
 Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Roskam For Congress Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Mailing Address P. O. Box 713

City	State	Zip Code
Wheaton	IL	60187

Transaction ID : 41178532

Purpose of Disbursement

011

Amount of Each Disbursement this Period

3500.00

Candidate Name

Mr. Peter RoskamCategory/
Type
 Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 06

SUBTOTAL of Disbursements This Page (optional)..... ►

8500.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. ROSKAM PAC

Mailing Address P. O. Box 1011

City Wheaton	State IL	Zip Code 60187
-----------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

ROSKAM PAC

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41178533

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Bill Cassidy For CongressMailing Address 8550 United Plaza Blvd.
Suite 1001

City Baton Rouge	State LA	Zip Code 70809
---------------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Rep. William Cassidy MD

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: LA District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41178534

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends Of Frank Guinta

Mailing Address P.O. Box 877

City Manchester	State NH	Zip Code 03105
--------------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Rep. Franklin Guinta

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NH District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41178785

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Sandy Adams For Congress

Mailing Address P. O. Box 1566

City	State	Zip Code
Orlando	FL	32802

Purpose of Disbursement

011

Candidate Name

Sandy AdamsCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 24

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179179

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Steve Fincher For Congress

Mailing Address PO Box 11153

City	State	Zip Code
Jackson	TN	38308

Purpose of Disbursement

011

Candidate Name

Mr. Steve FincherCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TN District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179188

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Pompeo For Congress Inc

Mailing Address PO Box 780146

City	State	Zip Code
Wichita	KS	67212

Purpose of Disbursement

011

Candidate Name

Rep. Mike PompeoCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: KS District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179266

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

8000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Mchenry For Congress

Mailing Address PO Box 1406

City Hickory	State NC	Zip Code 28603
-----------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Rep. Patrick Timothy McHenry

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NC District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179272

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Vern Buchanan For Congress

Mailing Address P. O. Box 48928

City Sarasota	State FL	Zip Code 34230
------------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Rep. Vern Buchanan

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: FL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179273

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Andy Harris For Congress

Mailing Address PO Box 1527

City Annapolis	State MD	Zip Code 21404
-------------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Mr. Andrew Harris

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: MD District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179274

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

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**SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Scalise For CongressMailing Address PO Box 23219
Suite 301

City Jefferson State LA Zip Code 70183

Purpose of Disbursement

Candidate Name

Rep. Steve ScaliseOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179331

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Yoder For Congress

Mailing Address PO Box 26742

City Overland Park State KS Zip Code 66225

Purpose of Disbursement

Candidate Name

Mr. Kevin YoderOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: KS District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179334

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. New Pioneers PACMailing Address 228 S WASHINGTON ST
STE 115

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement

Candidate Name

New Pioneers PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179415

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9500.00

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SCHEDULE B (FEC Form 3X)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Latham For CongressMailing Address P.O. Box 71
PO Box 71

City Clarion State IA Zip Code 50525

Purpose of Disbursement

Candidate Name

Rep. Thomas P. LathamOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41179448

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Lee Terry For Congress

Mailing Address PO Box 540098

City Omaha State NE Zip Code 68154

Purpose of Disbursement

Candidate Name

Rep. Lee TerryOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: NE District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41470997

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Morgan Griffith For Congress

Mailing Address PO Box 361

City Christiansburg State VA Zip Code 24068

Purpose of Disbursement

Candidate Name

Rep. Morgan GriffithOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2012
☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		09		2011

Transaction ID : 41471558

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Leadership of Today & Tomorrow

Mailing Address PO BOX 26641

City	State	Zip Code
LOS ANGELES	CA	90026

Purpose of Disbursement

011

Candidate Name

Leadership of Today & TomorrowCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	07	/	2011

Transaction ID : 41484464

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. John S Fund

Mailing Address PO Box 65796

City	State	Zip Code
Washington	DC	20035

Purpose of Disbursement

011

Candidate Name

John S FundCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	10	/	2011

Transaction ID : 41682877

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Friends Of Carolyn Mccarthy

Mailing Address 151 Linden Road

City	State	Zip Code
Mineola	NY	11501

Purpose of Disbursement

011

Candidate Name

Rep. Carolyn McCarthyCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	23	/	2011

Transaction ID : 41682879

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Defending and Investing in America's New Endeavors PAC (Diane PAC)

Mailing Address 819 Plantation Blvd.

City	State	Zip Code
Gallatin	TN	37066

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		01		2011

Transaction ID : 41682881

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Martha Roby For Congress

Mailing Address PO Box 195

City	State	Zip Code
Montgomery	AL	36101

Purpose of Disbursement

011

Candidate Name

Category/
Type**Ms. Martha Roby**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: AL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Transaction ID : 41983099

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Friends Of Joe Pitts

Mailing Address PO Box 775

City	State	Zip Code
Unionville	PA	19375

Purpose of Disbursement

011

Candidate Name

Category/
Type**Rep. Joseph R. Pitts**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: PA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		06		2011

Transaction ID : 41983100

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional).....▶

6000.00

TOTAL This Period (last page this line number only).....▶

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends Of Joe Pitts

Mailing Address PO Box 775

City	State	Zip Code
Unionville	PA	19375

Purpose of Disbursement

011

Candidate Name

Rep. Joseph R. Pitts

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: PA District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	06	/	2011

Transaction ID : 41983101

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Scalise For CongressMailing Address PO Box 23219
Suite 301

City	State	Zip Code
Jefferson	LA	70183

Purpose of Disbursement

011

Candidate Name

Rep. Steve Scalise

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: LA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2011

Transaction ID : 41983119

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Stivers For Congress

Mailing Address 4679 Winterset Drive

City	State	Zip Code
Columbus	OH	43220

Purpose of Disbursement

011

Candidate Name

Mr. Steve Stivers

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: OH District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	09	/	2011

Transaction ID : 41983121

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Lonestarpac

Mailing Address PO Box 1000 Highway 259 South

City	State	Zip Code
Lone Star	TX	75668

Purpose of Disbursement

011

Candidate Name

Lonestarpac

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 41983127

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Mary Bono Mack Committee

Mailing Address PO Box 3370

City	State	Zip Code
Palm Springs	CA	92263

Purpose of Disbursement

011

Candidate Name

Rep. Mary Bono Mack

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA

District: 45

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 41983128

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. Lance For Congress

Mailing Address PO Box 225

City	State	Zip Code
Colonia	NJ	07067

Purpose of Disbursement

011

Candidate Name

Rep. Leonard Lance

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ

District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2011

Transaction ID : 41983129

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Devin Nunes Campaign Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2011

Mailing Address PO Box 6545

City	State	Zip Code
Visalia	CA	93290

Transaction ID : 41983130

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Rep. Devin G. NunesCategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 21

1000.00

Full Name (Last, First, Middle Initial)

B. Silver State 21st Century PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

Mailing Address 3069 Conquista Ct.

City	State	Zip Code
Las Vegas	NV	89121

Transaction ID : 41983131

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

Silver State 21st Century PACCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

5000.00

Full Name (Last, First, Middle Initial)

C. The Madison PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

Mailing Address 235 STATE STREET
SUITE #206

City	State	Zip Code
SPRINGFIELD	MA	01103

Transaction ID : 41983132

Purpose of Disbursement

011

Amount of Each Disbursement this Period

Candidate Name

The Madison PACCategory/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Allyson Schwartz For Congress

Mailing Address P.O. Box 2232

City	State	Zip Code
Jenkintown	PA	19046

Purpose of Disbursement

011

Candidate Name

Rep. Allyson Y. Schwartz

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 41983133

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Matsui For Congress

Mailing Address PO Box 1738

City	State	Zip Code
Sacramento	CA	95812

Purpose of Disbursement

011

Candidate Name

Rep. Doris Matsui

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2011

Transaction ID : 42049913

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Matsui For Congress

Mailing Address PO Box 1738

City	State	Zip Code
Sacramento	CA	95812

Purpose of Disbursement

011

Candidate Name

Rep. Doris Matsui

Category/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	20	/	2011

Transaction ID : 42049960

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

8000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 157 OF 163

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Friends of Max Baucus

Mailing Address Box 586

City	State	Zip Code
Helena	MT	59624

Purpose of Disbursement

011

Candidate Name

Max Baucus

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: MT

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2011

Transaction ID : 42050523

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Steve Israel For Congress Committee

Mailing Address PO Box 777

City	State	Zip Code
Deer Park	NY	11729

Purpose of Disbursement

011

Candidate Name

Rep. Steve J. Israel

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2011

Transaction ID : 42050527

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. Marcia Fudge For Congress

Mailing Address 3729 Silsby Rd

City	State	Zip Code
University Heights	OH	44118

Purpose of Disbursement

011

Candidate Name

Rep. Marcia Fudge

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2012

☒ Primary ☐ General
☐ Other (specify) ▼

State: OH

District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		20		2011

Transaction ID : 42050533

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 158 OF 163

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Michael Burgess For Congress

Mailing Address PO Box 2334

City	State	Zip Code
Denton	TX	76202

Purpose of Disbursement

011

Candidate Name

Rep. Michael C. Burgess M.D.

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TX District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2011

Transaction ID : 42207898

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. Engel For Congress

Mailing Address 462 California Road

City	State	Zip Code
Bronxville	NY	10708

Purpose of Disbursement

011

Candidate Name

Rep. Eliot L. Engel

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NY District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2011

Transaction ID : 42207899

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Jon Runyan For Congress, Inc

Mailing Address PO Box 225

City	State	Zip Code
Colonia	NJ	07067

Purpose of Disbursement

011

Candidate Name

Rep. Jon Runyan

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NJ District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	28	/	2011

Transaction ID : 42207900

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

7000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. MARY'S PAC

Mailing Address P.O. Box 30844

City	State	Zip Code
Bethesda	MD	20824

Purpose of Disbursement

011

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 42207907

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. Majority Initiative To Keep Electing Republicans F

Mailing Address PO Box 65796

City	State	Zip Code
Washington	DC	20035

Purpose of Disbursement

011

Candidate Name

Category/
Type**Majority Initiative To Keep Electing Republicans F**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2011

Transaction ID : 42207925

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. Chris Gibson For Congress

Mailing Address PO Box 247

City	State	Zip Code
Kinderhook	NY	12106

Purpose of Disbursement

011

Candidate Name

Category/
Type**Chris Gibson**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NY District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2011

Transaction ID : 42208030

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 160 OF 163

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Citizens For Altmore

Mailing Address P.O. Box 1776

City Freedom	State PA	Zip Code 15042
-----------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Mr. Jason Altmore

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: PA District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 42208031

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Sue Myrick For Congress

Mailing Address P.O. Box 37091

City Charlotte	State NC	Zip Code 28237
-------------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Rep. Sue Wilkins Myrick

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: NC District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 42208032

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Friends Of Lois Capps

Mailing Address PO Box 23940

City Santa Barbara	State CA	Zip Code 93121
-----------------------	-------------	-------------------

Purpose of Disbursement

011

Candidate Name

Rep. Lois Capps

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 23

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		21		2011

Transaction ID : 42208033

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5000.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American College of Radiology Association Political Action Committee

011

Category/
Type

2500.00

Amount of Each Disbursement this Period

Category/
Type

Amount of Each Disbursement this Period

Category/
Type[illegible]

2500.00

180000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 162 OF 163

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

American College of Radiology Association Political Action Committee

Full Name (Last, First, Middle Initial)

A. Bank of America

Mailing Address P.O. Box 27025

City	State	Zip Code
Richmond	VA	23261-7025

Purpose of Disbursement
Bank Fees

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2011

Transaction ID : 42456202

Amount of Each Disbursement this Period

855.19

Bank Fees

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

855.19

855.19

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 163 OF 163
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) American College of Radiology Association Political Action Committee		FEC IDENTIFICATION NUMBER ▼ C C00343459
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee Majority Strategies		Date MM / DD / YYYY 09 / 23 / 2011
Mailing Address 135 Professional Drive Suite 104		Amount 25759.08
City Ponte Vedra Beach	State FL	Zip Code 32082
Purpose of Expenditure 2012 Utah Convention (Pre-Primary)	Category/ Type 004	Office Sought: <input type="checkbox"/> House State: UT <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Orrin G. Hatch		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 25759.08		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) 2012 Convention - Ut

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	Zip Code
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	25759.08
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	25759.08

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

DR William Herrington

[Electronically Filed]

Date

MM / DD / YYYY
10 / 19 / 2011

Signature